

# Child & Adolescent Health Centers



## Clinical Reporting Tool: SWP

A quick-start guide to using the CRT to enter, edit and view quarterly reports for School Wellness Program models

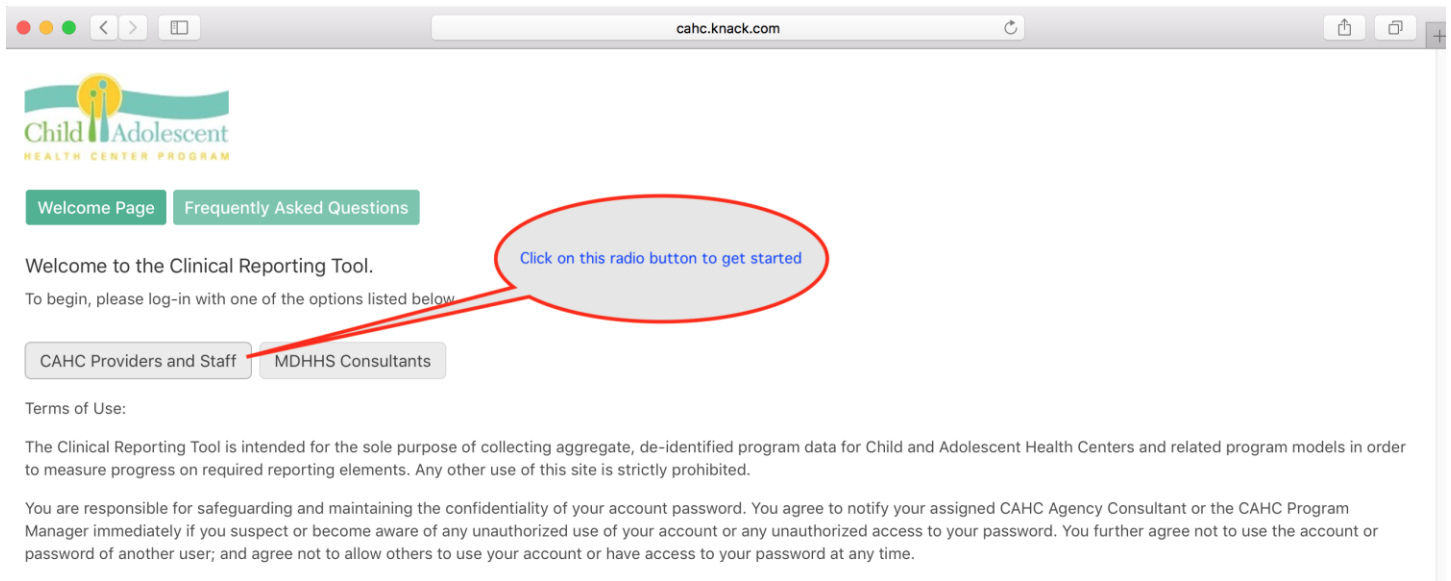
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# Getting Started



## Welcome Page

To begin reporting data for your Child and Adolescent Health Center (CAHC) School Wellness Program model (SWP) and Flint School Nursing model (FSN), click on this link: [CAHC Clinical Reporting Tool](#). This link will take you to the Welcome Page for the Clinical Reporting Tool (CRT) as shown in the screenshot above. As a SWP provider or other staff member who uses the CRT to enter, edit or view data, select the radio button "CAHC Providers and Staff" to begin the log-in process. This will take you to the log-in page where you will enter your email address and password. The first time you log in, you will be prompted to change your password. Once your password is changed, you are ready to use the CRT. For more information on changing your password, see p. 25.

## Access Page

After logging in, you will be directed to your access page. This page will show you a table listing all sites to which you have access; along with the assigned Agency Consultant. Select a SWP to begin working with by clicking on "view" in the far-right column (see screenshot below).

CAHC List - Provider View

Wellcome Page > CAHC List - Provider View

Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### Child and Adolescent Health Centers

search by keyword

Showing 1-7 of 7

CAHC Name	Fiduciary Organization	Consultant	View CAHC Details
Example clinical site	Example fiduciary	Test Staff	<a href="#">view</a>
Example Flint school nursing	Example fiduciary	Test Staff	<a href="#">view</a>
Example network alternative clinical	Example fiduciary	Test Staff	<a href="#">view</a>
Example network behavioral health	Example fiduciary	Test Staff	<a href="#">view</a>
Example network hub	Example fiduciary	Test Staff	<a href="#">view</a>
Example network school wellness program	Example fiduciary	Test Staff	<a href="#">view</a>
Example school wellness program	Example fiduciary	Test Staff	<a href="#">view</a>

You will be directed to that site's main page. This page will list SWP details such as SWP name, model and linkage type, fiduciary organization (sponsoring agency), assigned Agency Consultant and location (either county or city of Detroit) (see screenshot below). If any of this information appears incorrect or should happen to change, contact your assigned Agency Consultant to request an update. As you scroll down the page, you will see two series of radio buttons: a series for viewing reports (View Reports) and a series for entering and/or editing report data (Enter or Edit Data). You will begin by entering data, as reports will not populate until data has been entered.

[CAHC List - Provider View](#)[Frequently Asked Questions](#)[Welcome Page](#) > [CAHC List - Provider View](#) > [View Clinic Details](#)Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

## View CAHC Details

<b>CAHC Name</b>	Example school wellness program
<b>Model</b>	School wellness program
<b>Linkage Type</b>	School Based
<b>Fiduciary Organization</b>	Example fiduciary
<b>Consultant</b>	Test Staff
<b>Location</b>	Saginaw County

## View Reports

[2018 Quarterly Report](#) [2018 Annual Billing Report](#) [2018 Financial Status Report](#)

## Enter or Edit Data

[Unduplicated Users](#) [Users by Race](#) [Users by Ethnicity](#) [Visits](#) [Physical Exams and Immunizations](#) [Medical Tests](#) [RN Services](#)  
[Medicaid Outreach](#) [Health Education](#) [Quality Measures](#) [Budget and Expenditures](#) [Billing](#) [Top Diagnoses](#) [Referrals](#)[Back to CAHC List - Provider View](#)

# Tips and Reminders

## Navigating to your SWP Main Page or between Report Sections

If, at any time, you want to go to the SWP's main page or view a report (e.g., quarterly data), click on the View Clinic Details hyperlink located at the top of the page.

## Navigating between SWPs

If you work with multiple sites and, at any time, you want to work with or view another site, select the "CAHC List – Provider View" radio button or hyperlink located at the top of the page.

## Navigating between Fields

When entering or editing data, use the "Tab" key or mouse click to move between fields.

## Required Data

You must enter a "0" (zero) when you have no data to report in any of the required data fields. You will receive an error message and will be prompted to make corrections if any required fields are left blank. Due to the nature of how the CRT is programmed, there are some areas where SWPs will enter zeroes in data fields, as these elements only apply to the CAHC program.

## Data Validation

Data validation has been built into the system for certain data fields. You will receive an error message and will be prompted to make corrections if any fields contain errors that violate the data validation rules.

## Fiscal Years

Fiscal years begin on October 1 and end on September 30 e.g., Fiscal Year 2019: October 1, 2018 – September 30, 2019.

## Quarters and Quarterly Report Due Dates

<i>Quarter</i>	<i>Reports Due by</i>	<i>CRT Locks for Quarter on</i>
<b>Quarter 1:</b> October 1 – December 31	<b>January 30</b>	<b>March 1</b>
<b>Quarter 2:</b> January 1 – March 31	<b>April 30</b>	<b>June 1</b>
<b>Quarter 3:</b> April 1 – June 30	<b>July 30</b>	<b>September 1</b>
<b>Quarter 4:</b> July 1 – September 30 (includes annual/year-end only reports)	<b>October 30</b>	<b>December 1</b>

## Reporting FAQ

If you have a question on a reporting element, note there is a link to a reporting FAQ, that may have the answer you're looking for, at the top of each page. You can also visit the SWP website at [www.michigan.gov/SWP](http://www.michigan.gov/SWP) for the most up-to-date Report Definitions.

# Entering or Editing Data

## Process for Entering and Editing Data

The process for entering and editing data is the same across multiple subsections of the reports e.g., unduplicated users (including users by race and by ethnicity), visits, medical tests (pregnancy, chlamydia, gonorrhea and HIV testing), Medicaid outreach, health education and quality measures. Therefore, the process for entering and editing data will be described once, using data entry for unduplicated users as an example. Separate instructions are highlighted where there are variations to the process or where specific instructions pertain to a single report.

## Data Entry Process Example: Unduplicated Users

Select the “Unduplicated Users” radio button from the “Enter and Edit Data” section on your site’s main page (see screenshot below).

The screenshot displays the website interface for the Child Adolescent Health Center Program. At the top, there is a logo and navigation links: "CAHC List - Provider View" and "Frequently Asked Questions". Below this is a breadcrumb trail: "Welcome Page > CAHC List - Provider View > View Clinic Details" and a login status: "Logged in as Provider Test - My Account - Log Out".

The main content area is titled "View CAHC Details" and contains a table with the following information:

CAHC Name	Example school wellness program
Model	School wellness program
Linkage Type	School Based
Fiduciary Organization	Example fiduciary
Consultant	Test Staff
Location	Saginaw County

Below the table is a section titled "View Reports" with three buttons: "2018 Quarterly Report", "2018 Annual Billing Report", and "2018 Financial Status Report".

The "Enter or Edit Data" section is highlighted with a red arrow pointing to the "Unduplicated Users" button. This section contains a grid of buttons for various data entry categories:

- Unduplicated Users
- Users by Race
- Users by Ethnicity
- Visits
- Physical Exams and Immunizations
- Medical Tests
- RN Services
- Medicaid Outreach
- Health Education
- Quality Measures
- Budget and Expenditures
- Billing
- Top Diagnoses
- Referrals

At the bottom left, there is a link: "Back to CAHC List - Provider View".

You will now see an option to enter new data by selecting the “Add Unduplicated Users” radio button, as well as a table that displays any data that has previously been entered (see screenshot below).

Child Adolescent HEALTH CENTER PROGRAM

CAHC List - Provider View Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Unduplicated Users Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### Example school wellness program

Example fiduciary

Enter Data

Add Unduplicated Users

#### View Unduplicated Users

Fiscal Year	Quarter	Gender	0 through 4	5 through 9	10 through 17	18 through 21	Edit Data
No Data							

A data entry form will display. Select the current fiscal year. Select the current quarter. Select the gender for which you will be entering data first (male or female). Enter the number of users for the selected gender by the appointed age ranges. When all data is entered, click the “Submit” radio button at the bottom of the form (see screenshot below).

Child Adolescent HEALTH CENTER PROGRAM

Welcome Page CAHC List - Provider View Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Unduplicated Users > Add unduplicated users Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### Add Unduplicated Users

Enter the unduplicated user count for the quarter. You must enter male and female unduplicated users separately.

Fiscal Year \*  
2018

Quarter \*  
1

Gender \*  
Male

0 through 4 \*  
2

5 through 9 \*  
0

10 through 17 \*  
100

18 through 21 \*  
210

Submit

You will receive a message indicating your form has been successfully submitted. You will see a hyperlink near the bottom of the page that will allow you to “Reload the Form” and enter data for the other gender. You can also select the “Add Unduplicated Users” hyperlink at the top of the page to reload the form and enter data for the other gender (see screenshot on the next page).



## Add Unduplicated Users

Enter the unduplicated user count for the quarter. You must enter male and female unduplicated users separately.

Form successfully submitted.

[↻ Reload form](#)

Powered by [Knack](#)

[Back to Unduplicated Users](#)

Select either hyperlink to reload the form and complete data for the other gender

After data is entered and submitted, you can click on one of the "Unduplicated Users" hyperlinks (there is one located at both the top and bottom of the page). This action will take you back to the "Unduplicated Users" main page where you can view a table with unduplicated user data. If you see an error as you double-check your data entry, simply select the "edit" hyperlink in the far right column of the data for the row (quarter/gender) that you wish to correct. The form will display and you can make necessary edits in this form. You can also opt to go back to viewing clinic details if you don't wish to review your data at this time; and/or to move to the next section of the report. You can also select the "CAHC List – Provider View" radio button or hyperlink at the top of the page to move to another site (see screenshot below).



## Example school wellness program

Example fiduciary

### Enter Data

[Add Unduplicated Users](#)

### View Unduplicated Users

Fiscal Year 18	Quarter	Gender	0 through 4	5 through 9	10 through 17	18 through 21	Edit Data
2018	3	Male	2	0	100	0	edit

[Back to View Clinic Details](#)

Select to move to another SWP

Select either hyperlink to move to another section of the report

Select to edit data



# Network SWPs: Reporting Referrals

For Network SWPs only, you will report both "Referrals Received" and "Referrals Provided." To do so, click on the "Referrals" tab under "Clinic Details."

The screenshot shows the 'Child Adolescent Health Center Program' interface. At the top, there are two tabs: 'CAHC List - Provider View' and 'Frequently Asked Questions'. Below the tabs is a breadcrumb trail: 'Welcome Page > CAHC List - Provider View > View Clinic Details'. On the right, it says 'Logged in as Provider Test - My Account - Log Out'.

**View CAHC Details**

CAHC Name	Example network school wellness program
Model	Network school wellness program
Linkage Type	School Based
Fiduciary Organization	Example fiduciary
Consultant	Test Staff
Location	Barry County

**View Reports**

2018 Quarterly Report 2018 Annual Billing Report 2018 Financial Status Report

**Enter or Edit Data**

Unduplicated Users Users by Race Users by Ethnicity Visits Physical Exams and Immunizations Medical Tests RN Services Medicaid Outreach Health Education Quality Measures Budget and Expenditures Billing Top Diagnoses Referrals

Back to CAHC List - Provider View

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Click on "Add Referral" on the next screen.

The screenshot shows the 'Child Adolescent Health Center Program' interface. At the top, there are two tabs: 'CAHC List - Provider View' and 'Frequently Asked Questions'. Below the tabs is a breadcrumb trail: 'Welcome Page > CAHC List - Provider View > View Clinic Details > Referrals'. On the right, it says 'Logged in as Provider Test - My Account - Log Out'.

**Example network school wellness program**

Example fiduciary

**Add Data**

Add Referral

**View Referrals**

Fiscal Year	Quarter	Received / Provided	General Medical	Oral Health	Mental Health	Reproductive Health	Other	Edit Data
No Data								

Back to View Clinic Details

## Network Referrals Continued

A data entry form will display. Select the current fiscal year. Select the current quarter. Select the type of referral for which you will be entering data first (received or provided). Enter the number of referrals for the selected referral type by the appointed categories (general medical, oral health, mental health, reproductive health, and other). When all data is entered, click the “Submit” radio button at the bottom of the form (see screenshot below).

**Child Adolescent HEALTH CENTER PROGRAM**

[CAHC List - Provider View](#) [Frequently Asked Questions](#)

[Welcome Page](#) > [CAHC List - Provider View](#) > [View Clinic Details](#) > [Referrals](#) > [Add referrals](#) Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### Add Referrals

**Fiscal Year \***  
2018

**Quarter \***  
3

**Received / Provided \***  
Received

**General Medical \***  
20

**Oral Health \***  
10

**Mental Health (Psychiatric/Intensive Mental Health) \***  
15

**Reproductive Health \***  
10

**Other \***  
5

**Submit**

You will receive a message indicating your form has been successfully submitted. You will see a hyperlink near the bottom of the page that will allow you to “Reload the Form” and enter data for the other referral type. You can also select the “Add Referrals” hyperlink at the top of the page to reload the form and enter data for the other referral types.

## Reports and Reporting Elements that Do Not Pertain to SWP Models

There are some reports, and some reporting elements within reports, that SWP sites are not required to complete. The following list should help you navigate the various reports.

**Visits:** You can ignore the “Add Visits” and “Add Mental Health Visits” radio buttons. SWPs have a unique radio button titled, “Add SWP and FSN Visits.”

**Physical Exams:** Under the “Add Physical Exams and Immunizations” tab, please place zeroes under “total physical exams” and “physical exams billed to Medicaid” as SWP sites do not report on these elements. However, you still need to report on “immunizations” under this same tab. Please add data for “total immunizations” and “immunizations billed to Medicaid” by quarter. If your SWP does not provide immunizations, please place zeroes under immunizations so that program staff know immunizations were not provided.

**Medicaid Outreach Report:** SWP sites are not required to report on Medicaid Outreach Area 5 (Medicaid-specific training). While you do not have to report data for this outreach area, this is a required field for other CAHC models; therefore, you will need to enter zeroes in the corresponding fields in order to submit the form (report).

**Quality Measures Report:** SWP sites are not required to report all Quality Measures. SWPs are required to report: clients with an up-to-date (UTD) risk assessment/anticipatory guidance, clients age 10-21 years who are UTD with a depression screen (flag), clients age 12 and up with a positive depression screen (assessment), clients age 12 and up with a positive depression screen (assessment) who have documented, appropriate followup. Because all fields (all quality measures) are required for other CAHC models, you will need to enter zeroes in the fields that do not pertain to the SWP model in order to submit the form (report). For questions related to the depression screening, please see the [Mental Health Quality Measure Tip Sheet](#).

# Budgets and Expenditures (Financial Status Report/FSR)

## Data Entry Process for the Budget

From your SWP's main page, select the "Budget and Expenditures" radio button under the "Enter and Edit Data" section. The top half of the "Budget and Expenditures" main page displays budget information. The bottom half of the page displays "Expenditures" information. You will see tables that display any data that has previously been entered according to budget categories (View Categorical Budgets) and funding source (View Fund Source Budgets), as well as a table with links to view and edit Quarterly Expenditures. Under the section marked "Enter Budget Data," select the "Add Budget" radio button. (see screenshot below).

The screenshot shows a web browser window with the URL `cahc.knack.com`. The page header includes the logo for "Child Adolescent HEALTH CENTER PROGRAM" and navigation links: "Welcome Page", "CAHC List - Provider View", and "Frequently Asked Questions". Below the header, a breadcrumb trail reads: "Welcome Page > CAHC List - Provider View > View Clinic Details > Budget". The user is logged in as "Provider Test" with links for "My Account" and "Log Out".

The main content area is titled "ACCESS Child and Adolescent Health Center" and "ACCESS". Under the "Enter Budget Data" section, the "Add Budget" button is highlighted with a red arrow. Below this is a "Budgets" section.

The "View Categorical Budgets" section contains a table with the following columns: Fiscal Year, Salary and Wage, Fringe Benefits, Travel, Supplies and Materials, Contractual, Equipment, Other, Indirect, and Total Budget. The table shows "No Data".

The "View Fund Source Budgets" section contains a table with the following columns: Fiscal Year, State Agreement, Local, Federal, Other Source, Fees and Collections, and Total Budget. The table shows "No Data".

The "Expenditures" section contains a text prompt: "Select a fiscal year budget to add quarterly expenditures."

A data entry form will display. Each year in quarter 1, you will select the current fiscal year from the drop down menu and enter the budgeted dollar amounts both by category and by funding source; per the approved budget agreement that was submitted and approved as part of the NCAP (non-competitive application) process, and was subsequently included in the CAHC grant contract.

**Double-check your budget data prior to submitting the form.** When all budget data is entered and verified for accuracy, click the “Submit” radio button at the bottom of the form (see screenshot below).

cahc.knack.com

Enter Budget by Category

Salary and wage budget \*

200,000

Fringe benefits budget \*

100,000

Travel budget \*

3,000

Supplies and materials budget \*

6,500

Contractual budget \*

0

Equipment budget \*

0

Other budget \*

10,000

Indirect budget \*

0

Enter Budget by Fund Source

State agreement budget \*

250,000

Local budget \*

75,000

Federal budget \*

0

Other source budget \*

25,000

Fees and collections budget \*

75,000

Please verify that your budget is accurate before submission. You will not be able to edit your budget once submitted. If you do need to make corrections to a submitted budget, please contact your consultant.

Submit

You will receive a message indicating your form has been successfully submitted. You will see a hyperlink at the bottom of the page that will allow you to go “Back to Budget;” or you can select the “Budget” hyperlink at the top of the page. Either action will take you back to the “Budget and Expenditures” main page where you can now view your budget and enter first quarter expenditures.

**Note there is no “edit” hyperlink for the budget in this table as there is for other report data.** This feature prevents budgets from being amended without prior approval. If you made a data entry error, contact your assigned Agency Consultant.

You can also opt to go back to viewing clinic details if you want to move to the next section of the report portal; or select the “CAHC List – Provider View” radio button or hyperlink to move to another health center (see screenshot on following page).

## Data Entry Process for Expenditures (Financial Status Report/FSR)

On the bottom half of the “Budget and Expenditures” main page, you will see a section marked “Expenditures” with a table titled “Add Quarterly Expenditures.” In this table, select the “view and edit” hyperlink for the current fiscal year for which you are reporting (see screenshot on following page). (Note that this is the same page and process you will use to enter subsequent quarterly expenditures to the FSR.)

**cahc.knack.com**

Welcome Page | CAHC List - Provider View | Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Budget

Logged in as **Provider Test** - My Account - Log Out

**ACCESS Child and Adolescent Health Center**

**ACCESS**

Enter Budget Data

Add Budget

Budgets

View Categorical Budgets

Fiscal Year	Salary and Wage	Fringe Benefits	Travel	Supplies and Materials	Contractual	Equipment	Other	Indirect	Total Budget
2018	\$200,000.00	\$0.00	\$3,000.00	\$6,500.00	\$0.00	\$0.00	\$10,000.00	\$0.00	\$319,500.00

View Fund Source Budgets

Fiscal Year	State Agreement	Local	Federal	Other Source	Fees and Collections	Total Budget
2018	\$250,000.00	\$75,000.00	\$0.00	\$25,000.00	\$75,000.00	\$425,000.00

Expenditures

Select a fiscal year budget to add quarterly expenditures.

Add Quarterly Expenditures

Fiscal Year	Quarterly Expenditures
2018	<a href="#">view and edit</a>

[Back to View Clinic Details](#)

**Callouts:**

- Select to move to another CAHC (points to CAHC List - Provider View)
- Select either hyperlink to move to another section of the report (points to View Clinic Details)
- No links to edit the budget (points to the Budget table)
- Select to enter quarterly expenditures (points to view and edit link)

At the top of the “Expenditures” page, you will see a section marked “Add Quarterly Expenditures” as well as tables that display expenditures according to category (Quarterly Expenditures by Category) and funding source (Quarterly Expenditures by Fund Source). This page also includes a “Certification” section which displays at the bottom of the page. At the top of the page, under the section marked “Add Quarterly Expenditures,” select the “Add Expenditures” radio button (see screenshot below).

**cahc.knack.com**

Welcome Page | CAHC List - Provider View | Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Budget > Quarterly expenditures

Logged in as **Provider Test** - My Account - Log Out

**ACCESS Child and Adolescent Health Center**

**Add Quarterly Expenditures**

Add Expenditures

Quarterly Expenditures by Category

Quarter	Salaries and Wages	Fringe Benefits	Travel	Supplies and Materials	Contractual	Equipment	Other	Indirect Costs	Total Expenditures	Edit Expenditures
No Data										

Quarterly Expenditures by Fund Source

Quarter	State Agreement	Local	Federal	Other Source	Fees and Collections	Total Expenditures (Source)	Edit Expenditure
No Data							

Certifications

Quarter	Certification Signature	Certification Date	Add Certification
No Data			

[Back to Budget](#)

**Callout:**

- Add Expenditures (points to the Add Expenditures button)

A data entry form will display. Select the current quarter for which you are reporting from the drop down menu, and enter the dollar amounts for expenditures by category (e.g., salaries and wages, fringe benefits, etc.) and by funding source (e.g., state agreement, local funds, etc.) for the quarter. At the bottom of the form, you will see the “Add Certification” section. Select the current date (which should be the default date) from the calendar in the “Certification Date” field. Using your mouse, sign the “Certification Signature” box and click on the “Submit” radio button. (Note you have options to undo key strokes or reset the signature if your signature is not legible.) See screenshot on next page.

Other \*

1000

Indirect costs \*

0

Enter Expenditures by Fund Source

State agreement \*

75,789

Local \*

10,000

Federal \*

0

Other source \*

2,000

Fees and collections \*

34,000


Add Certification

Add a signature to certify that your data is finalized for the quarter. You may leave this field blank if your data is not finalized at this time. To add a certification to previously entered data, click the 'certify' link in the Certifications table above.

Certification Date

01/03/2018

Certification Signature



reset

I certify that I am authorized to sign on behalf of the local agency and that this is an accurate statement of expenditures and collections for the report period. Appropriate documentation is available and will be maintained for the required period to support costs and receipts reported.

Submit

You will receive a message that the form has been successfully submitted. You will see a hyperlink at the bottom of the page that will allow you to go back to the “Quarterly Expenditures” page. You can also select the “Budget” hyperlink at the top of the page to go back to the “Budget and Expenditures” main page (see screenshot below).

Child Adolescent Health Care Program

Welcome Page | CAHC List - Provider View | Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Budget > Quarterly expenditures > Add expenditures

Logged in as **Provider Test** - My Account - Log Out

Add Expenditures

Form successfully submitted.

[Reload form](#)

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[Back to Quarterly expenditures](#)

Select to move back to the Budget and Expenditures main page

Select either hyperlink to move back to the Quarterly Expenditures main page

Navigating to “Quarterly Expenditures” will take you back to the “Expenditures” page where you can now view your quarterly expenditures.

If you see an error and need to edit expenditures, click on the “edit” hyperlink in the far right column of the table titled “Add Quarterly Expenditures” (see screenshot on following page). Two tables will display; one showing “Quarterly Expenditures by Category” and one showing “Quarterly Expenditures by Fund Source.” In the far right column of the table that corresponds to the edit you wish to make (category or fund source and quarter), select the “edit” hyperlink (see screenshot on following page). The form will reload and you will then be able to edit data.

cahc.knack.com

Child Adolescent Health Center Program

Welcome Page CAHC List - Provider View Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Budget > Quarterly expenditures

Logged in as Provider Test - My Account - Log Out

### ACCESS Child and Adolescent Health Center

Add Quarterly Expenditures

Add Expenditures

#### Quarterly Expenditures by Category

Quarter	Salaries and Wages	Fringe Benefits	Travel	Supplies and Materials	Contractual	Equipment	Other	Indirect Costs	Total Expenditures	Edit Expenditures
1	\$52,168.00	\$24,223.00	\$150.00	\$300.00	\$0.00	\$0.00	\$1,000.00	\$0.00	\$77,841.00	<a href="#">edit</a>
YTD expenditures	\$52,168.00	\$24,223.00	\$150.00	\$300.00	\$0.00	\$0.00	\$1,000.00	\$0.00	\$77,841.00	

#### Quarterly Expenditures by Fund Source

Quarter	State Agreement	Local	Federal	Other Source	Fees and Collections	Total Expenditures (Source)	Edit Expenditure
1	\$75,789.00	\$10,000.00	\$0.00	\$2,000.00	\$34,000.00	\$121,789.00	<a href="#">edit</a>
YTD expenditures	\$75,789.00	\$10,000.00	\$0.00	\$2,000.00	\$34,000.00	\$121,789.00	

#### Certifications

Quarter	Certification Signature	Certification Date	Add Certification
1		01/03/2018	<a href="#">certify</a>

[Back to Budget](#)

To view the complete FSR, navigate back to the health center's main page by selecting the "View Clinic Details" hyperlink at the top of the page and click the "Financial Status Report" radio button under the "View Reports" section. See p. 22 for further information on the Financial Status Report.

## Budget and FSR Reminders

New budget line items cannot be added during the fiscal year without first having an approved budget amendment on record. As a result, you will not be able to enter expenditures for any line items that are not included on the original approved budget, regardless of the source of funds.

A cost deviation allowance of 15% or \$10,000 per line item (whichever is greater) is permitted. Any deviations over this amount will be flagged on the Financial Status Report in bold red font. **If you anticipate exceeding the cost deviation allowance on any line item, a budget amendment must be requested and approved in advance.**

Any and all budget amendments must be requested and approved by July 1. **No exceptions can be made to that deadline.**

Budgets will be unlocked for editing (and/or only until July 15) so that any approved changes can be made to the budget by your assigned Agency Consultant.

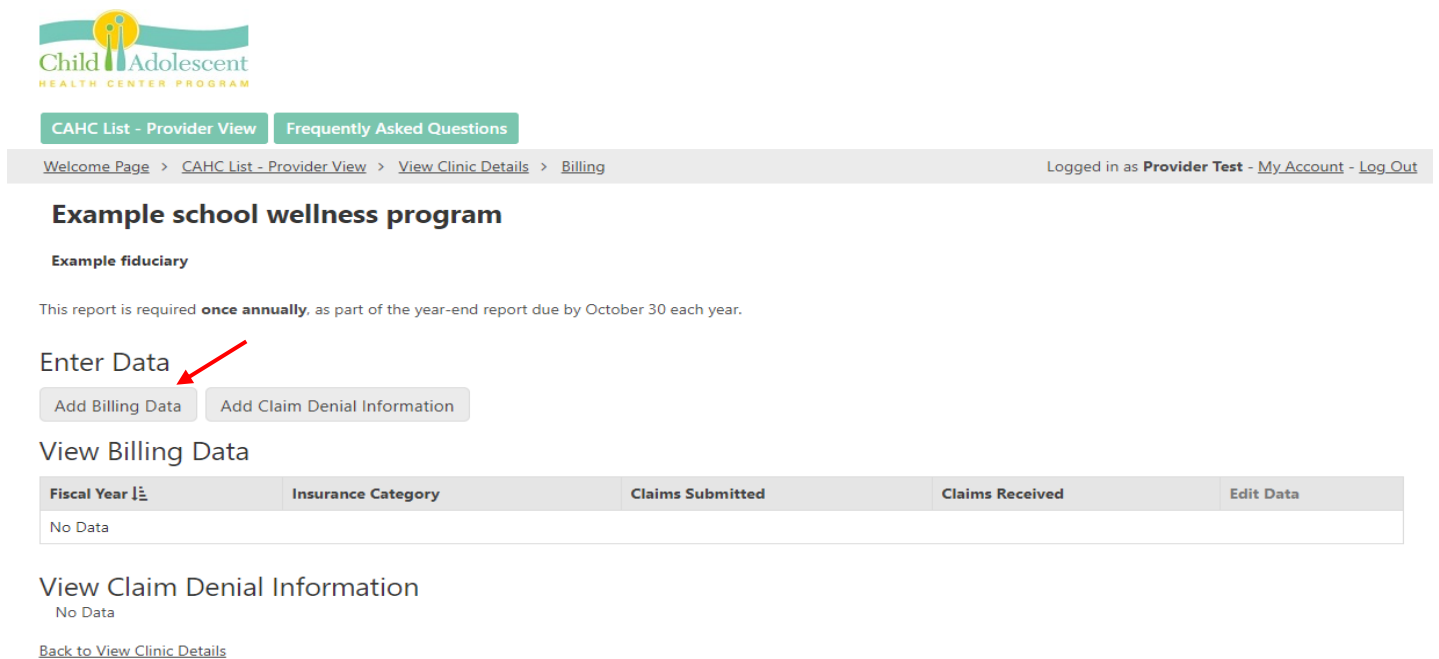


# Annual (Year-End) Only Reports

## Annual Billing Report (for SWPs currently billing)

This section only pertains to SWP sites that are currently billing for mental health and/or RN services. If your site is not currently billing, please skip this section of the report. Do not enter zeroes or complete any of the fields.

From your site's main page, select the "Billing Report" radio button under the "Enter or Edit Data" section. You will now see an "Enter Data" section with radio buttons providing options to "Add Billing Data" and "Add Claims Denial Information." You will also see tables that displays any previously-entered billing data and claims denial information. To begin, select the "Add Billing Data" radio button (see screenshot below).



The screenshot shows the website interface for the Child Adolescent Health Center Program. At the top, there is a logo and navigation links: "CAHC List - Provider View" and "Frequently Asked Questions". Below this is a breadcrumb trail: "Welcome Page > CAHC List - Provider View > View Clinic Details > Billing". The user is logged in as "Provider Test" with links for "My Account" and "Log Out".

### Example school wellness program


**Example fiduciary**

This report is required **once annually**, as part of the year-end report due by October 30 each year.

#### Enter Data

A red arrow points to the "Add Billing Data" button. There is also an "Add Claim Denial Information" button.

#### View Billing Data

Fiscal Year 	Insurance Category	Claims Submitted	Claims Received	Edit Data
No Data				

#### View Claim Denial Information

No Data

[Back to View Clinic Details](#)

A data entry form will display. Select the current fiscal year for which you are reporting from the drop down menu. Under the "Insurance Category" field, select a Medicaid Health Plan, Medicaid Fee for Service, Commercial, Self-Pay or Other from the dropdown menu. Enter the dollar amount in claims submitted during the fiscal year regardless of whether or not claims were paid during the fiscal year, per the selected payor. Enter the dollar amount in claims received during the fiscal year regardless of whether or not the revenue resulted from claims filed during the fiscal year, per the selected payor. Click on the "Submit" button (see screenshot on following page).

## Add Billing Data

Report the dollar amount in claims submitted for services provided from October 1 to September 30, regardless of whether or not the claims were paid this fiscal year. Report the dollar amount received in revenue from October 1 through September 30 regardless of whether or not revenue resulted from claims filed during the fiscal year.

**Fiscal Year \***

2018

**Insurance Category \***

Blue Cross Complete of Michigan

**Claims Submitted (\$) \***

12000

**Claims Received (\$) \***

6000

Submit

You will receive a message that the form was successfully submitted. Select the "Reload the Form" hyperlink to enter information for another payor, repeating the process until data for all payors are reported. After all data is reported, select the "Back to Billing" hyperlink at either the top or bottom of the page (see screenshot below) to return to the "Billing Report" main page.



## Add Billing Data

Report the dollar amount in claims submitted for services provided from October 1 to September 30, regardless of whether or not the claims were paid this fiscal year. Report the dollar amount received in revenue from October 1 through September 30 regardless of whether or not revenue resulted from claims filed during the fiscal year.

Form successfully submitted.

[Reload form](#)

Powered by Knack

[Back to Billing](#)

Select either hyperlink  
to return to Billing Report  
main page

On the "Billing Report" main page, under the "View Billing Data" section, you will see a table displaying the reported claims and revenue information by payor. As you review data, if you see an error, select the "edit" hyperlink in the far right column that corresponds to the data (row) which requires editing (see screenshot on following page). The form will reload and you can make the necessary edits e.g., correcting the payor name and/or dollar amount(s). (Note: if you inadvertently entered data for a health plan for which you did not submit claims or receive reimbursement, you can zero out the dollar amounts.) When billing data entry is complete, you can select the "Add Claims Denial Information" radio button to continue with the next section of the Billing Report.

CAHC List - Provider View
Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Billing

Logged in as **Provider Test** - My Account - Log Out

## Example school wellness program

**Example fiduciary**

This report is required **once annually**, as part of the year-end report due by October 30 each year.

### Enter Data

Add Billing Data
Add Claim Denial Information

*Select to move to the second half of the billing report*

### View Billing Data

Fiscal Year	Insurance Category	Claims Submitted	Claims Received	Edit Data
2018	Blue Cross Complete of Michigan	\$12,000.00	\$6,000.00	edit

*Select to edit billing data*

### View Claim Denial Information

No Data

[Back to View Clinic Details](#)

A data entry form will display. Select the current fiscal year for which you are reporting from the drop down menu. Click on the checkboxes which correspond to the five most frequent reasons for denial of claims submitted during the current fiscal year. (These reasons are overall reasons for rejection of claims across payors.) In the textbox at the bottom of the form, you have the option to identify any Medicaid Health Plan with whom your health center had significant rejection/reimbursement issues during the fiscal year along with a brief summary of these issues. Click on the "Submit" button (see screenshot below).

Fiscal Year \*

2018

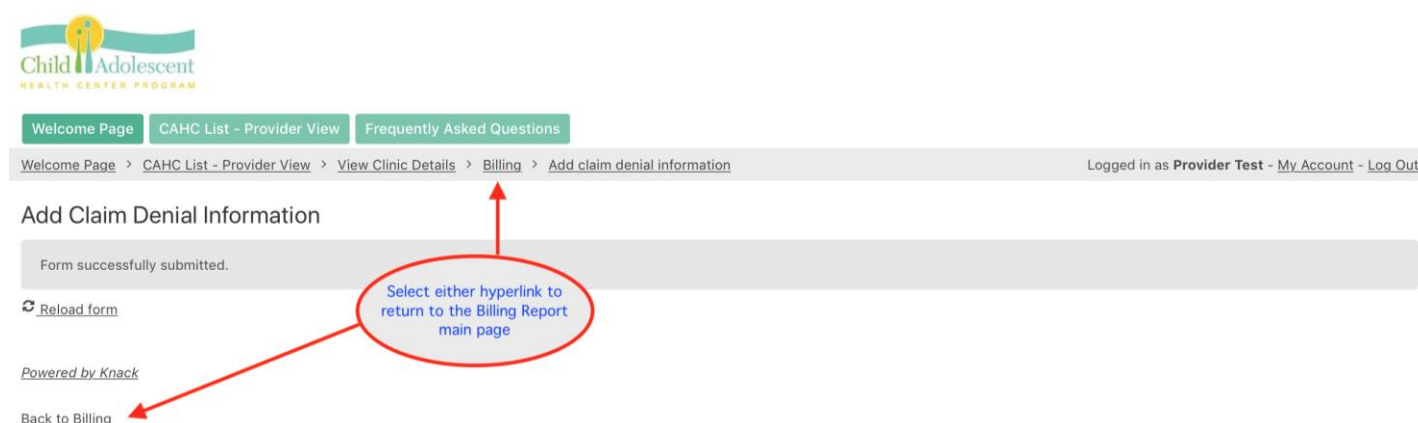
Select the five most frequent reasons for denial of claims submitted during the current fiscal year.

☐ Insufficient information on coordination of benefits
☐ Incorrect insurance entered for date of service
☐ Service provided after termination of client coverage
☒ Maximum benefit reached
☐ Time limit for filing expired
☒ Coding errors
☐ Diagnosis code not payable or not a covered benefit
☐ No prior authorization
☐ Not a known beneficiary
☐ Provider not credentialed with plan
☐ Out of network provider
☐ Other

Identify the Medicaid Health Plan(s) which denied the most claims during the current fiscal year and BRIEFLY summarize issues experienced with this plan(s).

Submit

You will receive a message that the form was successfully submitted. Select the “Back to Billing” hyperlink at the bottom of the page or the “Billing” hyperlink at the top of the page to return to the “Billing Report” main page (see screenshot below).



On the “Billing Report” main page, under the “View Claim Denial Information” section, you will see a summary of the claims denial information. As you review data, if you see an error, select the “edit” hyperlink that corresponds to the data which requires editing (see screenshot below). The form will reload and you can then edit the data.

CAHC List - Provider View Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > Billing Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

## Example school wellness program

**Example fiduciary**

This report is required **once annually**, as part of the year-end report due by October 30 each year.

### Enter Data

[Add Billing Data](#) [Add Claim Denial Information](#)

### View Billing Data

Fiscal Year	Insurance Category	Claims Submitted	Claims Received	Edit Data
2018	Blue Cross Complete of Michigan	\$12,000.00	\$6,000.00	<a href="#">edit</a>

### View Claim Denial Information

**Fiscal Year** 2018

**Claim Denial Summary**

**Reasons for Denial** Time limit for filing expired, Coding errors

[edit](#)

[Back to View Clinic Details](#)

To view the complete annual billing report, navigate back to the site’s main page by selecting the “View Clinic Details” hyperlink at either the top or bottom of the page. From the site’s main page, click the “Annual Billing Report” radio button under the “View Reports” section.

## Top Diagnoses (Top Five Diagnoses and CPT Codes)

The process for entering and editing data is the same for the diagnoses and CPT codes. Therefore, the process for entering and editing data will be described once, using data entry for top five mental health problem diagnoses as an example.

From the site's main page, select the "Add Top Mental Health Problem Diagnoses" radio button under the "Enter or Edit Data" section. You will now see a series of radio buttons for top primary diagnoses, medical problem diagnoses, mental health problem diagnoses and CPT codes; followed by a series of tables which will display data once entered (see screenshot below). You will ignore the "Add Top Primary Diagnoses" and "Add Top Medical Problem Diagnoses" radio buttons as you will not enter this data for a SWP site.

[CAHC List - Provider View](#) [Frequently Asked Questions](#)

[Welcome Page](#) > [CAHC List - Provider View](#) > [View Clinic Details](#) > [Top Diagnoses](#) Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### Example school wellness program


Example fiduciary

This report is required **once annually**, as part of the year-end report due by October 30 each year.


#### Add Data

[Add Top Primary Diagnoses](#) [Add Top Medical Problem Diagnoses](#) [Add Top Mental Health Problem Diagnoses](#) [Add Top CPT Codes](#)

#### Top Five Mental Health Problem Diagnoses

Fiscal Year 	1. Code	1. Description	1. Frequency	2. Code	2. Description	2. Frequency	3. Code	3. Description	3. Frequency	4. Code	4. Description	4. Frequency
No Data												

#### Top Five CPT Codes

Fiscal Year 	1. Code	1. Description	1. Frequency	2. Code	2. Description	2. Frequency	3. Code	3. Description	3. Frequency	4. Code	4. Description	4. Frequency
No Data												

[Back to View Clinic Details](#)

## Data Entry Process Example: Top Five Mental Health Problem Diagnoses

Select the "Add Top Five Mental Health Problems Diagnoses" radio button from the "Add Data" section on the "Top Diagnoses" main page. A data entry form will display (see screenshot on following page). Select the current fiscal year from the dropdown menu. There are five fields for entering the codes, the descriptions (names/titles of the diagnoses or procedures) and the frequencies. Begin by starting with the most frequent code in form field 1. Tabbing will move you through the form vertically, therefore you will complete all codes first, followed by descriptions, and finishing with frequencies. When you are finished entering data, select the "Submit" radio button.

## Add Top Five Mental Health Problem Diagnoses

Provide the top five mental health PROBLEM diagnoses (from the mental health provider) for the selected fiscal year.

Fiscal Year \*

Select... ▼

1. Code \*

1. Description \*

1. Frequency \*

2. Code \*

2. Description \*

2. Frequency \*

3. Code \*

3. Description \*

3. Frequency \*

4. Code \*

4. Description \*

4. Frequency \*

5. Code \*

5. Description \*

5. Frequency \*

Submit

You will receive a message indicating your form has been successfully submitted. You will see a “Return to Top Diagnoses” hyperlink at the bottom of the page and a “Top Diagnoses” hyperlink at the top of the page. Click on either link to return to the “Top Diagnoses” main page where you can continue data entry for other diagnoses/CPT codes by selecting the corresponding radio buttons; and also to view data entries.

When reviewing your data, use the scroll bar to scroll to the far right, to the end of the table. If you see data that requires editing, click on the “edit” hyperlink in the far right column. The form will reload and you will then be able to edit data. After editing data, click the “Submit” radio button.

# Viewing Reports

On your SWP site main page, you will also see two series of radio buttons: a series for viewing reports (View Reports) and a series for entering and/or editing report data (Enter or Edit Data). Reports will populate after data has been entered.

To print any report, click on the "Print" hyperlink in the top right corner of the report's page.

You can navigate back to the SWP site main page by selecting the "View Clinic Details" hyperlink or select the "CAHC List – Provider View" radio button or hyperlink at the top of the page to navigate back to your main access page.

## Viewing the Quarterly Data Report

Navigate to the health center's main page by selecting the "View Clinic Details" hyperlink at the top of the page and click the "Quarterly Report" radio button under the "View Reports" section (see screenshot below).

CAHC List - Provider View   Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details   Logged in as **Provider Test** - My Account - Log Out

### View CAHC Details

CAHC Name	Example school wellness program
Model	School wellness program
Linkage Type	School Based
Fiduciary Organization	Example fiduciary
Consultant	Test Staff
Location	Saginaw County

### View Reports

2018 Quarterly Report   2018 Annual Billing Report   2018 Financial Status Report

### Enter or Edit Data

Unduplicated Users   Users by Race   Users by Ethnicity   Visits   Physical Exams and Immunizations   Medical Tests   RN Services

Medicaid Outreach   Health Education   Quality Measures   Budget and Expenditures   Billing   Top Diagnoses   Referrals

[Back to CAHC List - Provider View](#)

The report will populate with a combination of graphs, charts and tables displaying reporting elements, including quality measures. (see screenshot below for example).

CAHC List - Provider View   Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details > View Quarterly Report   Print   Logged in as **Provider Test** - My Account - Log Out

### 2018 Quarterly Report

#### Example school wellness program

Example fiduciary

#### Unduplicated Users

Fiscal Year	Quarter	Gender	0 through 4	5 through 9	10 through 17	18 through 21	Total Users
2018	3	Male	2	0	100	0	102
		<b>Total</b>	<b>2</b>		<b>100</b>		<b>102</b>

#### Users by Race

Fiscal Year	Quarter	White	Black / African American	Asian	Native Hawaiian / Pacific Islander	American Indian / Alaskan Native	More than One Race	Total Users
No Data								

## Viewing the Annual Billing Report

Navigate to the site's main page by selecting the "View Clinic Details" hyperlink at the top of the page. Select the "Annual Billing Report" radio button under the "View Reports" section (see screenshot below).

[CAHC List - Provider View](#) [Frequently Asked Questions](#)

Welcome Page > [CAHC List - Provider View](#) > [View Clinic Details](#) Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

### View CAHC Details

<b>CAHC Name</b>	Example school wellness program
<b>Model</b>	School wellness program
<b>Linkage Type</b>	School Based
<b>Fiduciary Organization</b>	Example fiduciary
<b>Consultant</b>	Test Staff
<b>Location</b>	Saginaw County

### View Reports

[2018 Quarterly Report](#) [2018 Annual Billing Report](#) [2018 Financial Status Report](#)

### Enter or Edit Data

[Unduplicated Users](#) [Users by Race](#) [Users by Ethnicity](#) [Visits](#) [Physical Exams and Immunizations](#) [Medical Tests](#) [RN Services](#)

[Medicaid Outreach](#) [Health Education](#) [Quality Measures](#) [Budget and Expenditures](#) [Billing](#) [Top Diagnoses](#) [Referrals](#)

[Back to CAHC List - Provider View](#)

The Annual Billing Report contains a table displaying the dollar amounts of claims submitted and reimbursement by individual payor, as well as pie charts displaying the (estimated) percent of claims paid by major payor categories (e.g., all Medicaid Health Plans, Commercial, Self-Pay and Other). There is also a bar graph depicting (an estimated) percent of claims paid by individual Medicaid Health Plan. A pie chart displaying payor mix is also included, displaying percentage of revenue received by major payor categories.

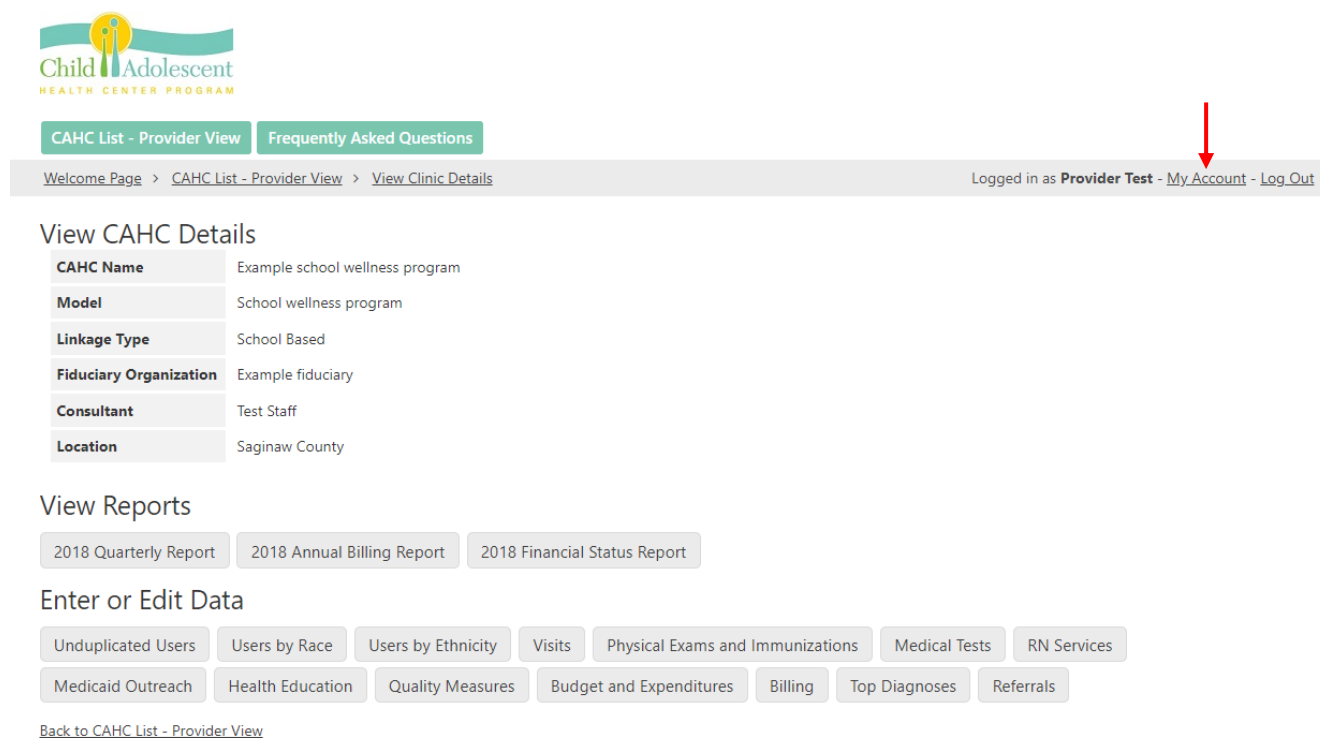


# Changing your Password

## Changing your Password

As a system security and user maintenance feature, you will be prompted to change your password every at regular intervals. If your password is not changed by the deadline set forth in the reminder, further system access will be denied and you will need to contact a system administrator for assistance.

You can also change your password at any time by clicking on the My Account hyperlink in the top right hand corner (see screenshot below).



The screenshot shows the website interface for the Child Adolescent Health Center Program. At the top left is the logo. Below it are two buttons: 'CAHC List - Provider View' and 'Frequently Asked Questions'. A breadcrumb trail reads 'Welcome Page > CAHC List - Provider View > View Clinic Details'. On the right, it says 'Logged in as **Provider Test** - [My Account](#) - [Log Out](#)'. A red arrow points to the 'My Account' link. Below the login bar is the 'View CAHC Details' section with a table of information. Underneath is the 'View Reports' section with three buttons. The 'Enter or Edit Data' section contains two rows of buttons for various data entry points. At the bottom left is a 'Back to CAHC List - Provider View' link.

**Child Adolescent HEALTH CENTER PROGRAM**

CAHC List - Provider View   Frequently Asked Questions

Welcome Page > CAHC List - Provider View > View Clinic Details   Logged in as **Provider Test** - [My Account](#) - [Log Out](#)

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2018 Quarterly Report   2018 Annual Billing Report   2018 Financial Status Report

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Unduplicated Users   Users by Race   Users by Ethnicity   Visits   Physical Exams and Immunizations   Medical Tests   RN Services

Medicaid Outreach   Health Education   Quality Measures   Budget and Expenditures   Billing   Top Diagnoses   Referrals

[Back to CAHC List - Provider View](#)